



Filing a CT-15 Return with Schedule H

Tutorials

Tutorials to provide assistance with functionality included within **myconnect**

- [How do I create a username?](#)
- [How do I file a Sales Tax return?](#)
- [More Tutorials](#)

Business Registration

Select the link below if you need to register and get a Connecticut Tax Registration Number

- [New Business/Need a CT Registration Number?](#)

Payments

Submit a payment for a bill you received in the mail

- [Make a Bill Payment](#)

Quick Links

Shortcuts to other e-Services

- [Taxpayer Service Center Homepage \(TSC\)](#)

File 1099s

Submit bulk file for 1099-MISC or 1099-NEC and associated CT-1096.



- [File 1099-NEC/CT-1096](#)

Submissions

Submissions are items you have submitted online for processing. Common examples include returns and payments.

- [Find a Submission](#)



The data you see in this tutorial is completely fictitious. It was made for instructional purposes only. Any resemblance to a real person or business is completely coincidental.

Quick Links

Shortcuts to other e-Services

Taxpayer Service Center Homepage (TSC)

File 1099s

Submit bulk file for 1099-MISC or 1099-NEC and associated CT-1096.

File 1099-NEC/CT-1096

Submissions

Submissions are items you have submitted online for processing. Common examples include returns and payments.

Find a Submission



Once you are logged in to **myconneCT**, the Summary page is displayed. All of your accounts are displayed here by default. Locate your Cigarette Distributor account.

To begin, click the **File Now** hyperlink.

Summary Action Center Settings More...

Filter

Cigarette Distributor

Wholesaler Stamper
TOBACCO PRODUCTS LLC
100 MAIN ST
HARTFORD CT 06106-1805

Return Period Ending On 31-Aug-2021 [File Now](#)

Monthly Filer

Due

27-Sep-2021

Account

Account ID: 0108746652

CT Tax Reg No: 100951061001

Balance

\$0.00

[View/File Returns and View Period Detail](#)

[Order Cigarette Stamps](#)

Tobacco Products

TOBACCO PRODUCTS LLC
100 MAIN ST
HARTFORD CT 06106-1805

Return Period Ending On 31-Aug-2021 [File Now](#)

Monthly Filer

Due

27-Sep-2021 ✓

Complete the Unaffixed Connecticut Cigarette Tax Decals and Stamps at Face Value return line items, then click **Next**.

Form CT-15 Connecticut Monthly Tax Stamp and Cigarette Report - Resident Distributor

Report Line Items

For form instructions, please click [here](#).

Unaffixed Connecticut Cigarette Tax Decals and Stamps at Face Value

| | | |
|----|--|------------|
| 1. | Inventory on hand on the first day of the month covered by this report | 189,720.00 |
| 2. | Enter total purchases actually received during the month. Total should agree with Form CT-39, Record of Cigarette Stamps Purchased Resident Distributors, which must accompany this report | 0.00 |
| 3. | Total available unaffixed decals and stamps (Sum of line 1 and 2) | 189,720.00 |
| 4. | Closing inventory. Total should agree with Form CT-31, Cigarette and Unaffixed Stamp Inventory Report for Resident Distributors, which must accompany this report. | 159,763.00 |
| 5. | Total affixed decals and stamps (Line 4 subtracted from line 3) | 29,957.00 |
| 6. | Restamping credit. Total face value of decals or stamps affixed in presence of a revenue examiner during the month to correct unacceptable indicia and entered by the examiner on Form O-252, Order Form for Connecticut Cigarette Tax Stamps. No credit for restamping is allowed unless this line is completed | 0.00 |
| 7. | All other deductions | 0.00 |
| 8. | Total deductions (Sum of lines 6 and 7) | 0.00 |
| 9. | Decals and stamps applied to unstamped cigarettes (Line 8 subtracted from line 5) | 29,957.00 |

Cancel

Save Draft

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Next >

Complete the Report of Unstamped Cigarettes return line items, then click **Next**.

Report Line Items

Report Line Items (Continued)

For form instructions, please click [here](#).

Report of Unstamped Cigarettes

| | |
|--|-----------|
| 10. Beginning inventory. This should be the same figure with which you closed the previous month | 435,720 |
| 11. Total cigarettes purchased or otherwise acquired. Total should agree with Form CT-19, Schedule A, which must accompany this report | 720,000 |
| 12. Total available cigarettes (Sum of lines 10 and 11) | 1,155,720 |
| 13. Closing inventory this month. Total should agree with Form CT-31, which must accompany this report | 878,540 |
| 14. Unstamped cigarettes to be accounted for (Line 13 subtracted from line 12) | 277,180 |
| 15. Sales to agencies of U.S. and Connecticut. Total should agree with Form CT-23, Schedule B, which must accompany this report | 134,675 |
| 16. Sales and transfers outside Connecticut. Total should agree with Form CT-25, Schedule C, which must accompany this report | 0 |
| 17. Sales and transfers to licensed distributors. Total should agree with Form CT-24, Schedule D, which must accompany this report | 0 |
| 18. Unstamped cigarettes stamped by you (Line 9 divided by the tax rate per cigarette (\$0.2175)) | 137,733 |
| 19. Other | 0 |
| 20. Unstamped cigarettes to be accounted for (Sum of lines 15 through 19) | 272,408 |
| 21. Unstamped cigarettes not accounted for (Subtract line 20 from line 14) | 4,772 |

Cancel

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Next >

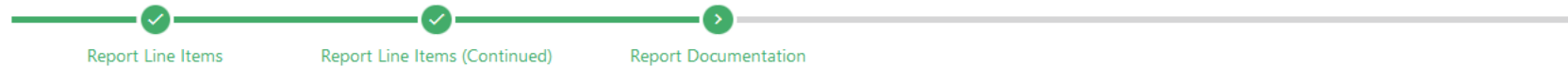


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Click **Add** to attach the required schedules and return documentation.

Important: The required Schedule H file layout is available for download from the DRS website: [here](#).

Form CT-15 Connecticut Monthly Tax Stamp and Cigarette Report - Resident Distributor



For form instructions, please click [here](#).

Report Documentation

Form CT-15 must be filled out with the appropriate forms and schedules attached. You can visit the [CT Department of Revenue services website](#) to download and print the forms listed below.

- **Schedule H**, *Cigarette Packages Stamped During the Month*;
- **Form CT-19**, *Schedule A, Record of Unstamped Cigarettes Manufactured, Purchased, or Otherwise Acquired*;
- **Form CT-23**, *Schedule B, Shipments of Unstamped Cigarettes Made to Agencies of the Federal or Connecticut State Government*;
- **Form CT-24**, *Schedule D, Unstamped Cigarettes Transferred to Another Distributor Within Connecticut*;
- **Form CT-25**, *Schedule C, Sales and Transfers of Unstamped Cigarettes Outside of Connecticut*;
- **Form CT-31**, *Cigarette and Unaffixed Stamp Inventory Report for Resident Distributors*; or
- **Form CT-38**, *Record of Cigarette Stamps Purchased by Distributors*.

[Click here to see file specifications](#)

Attachments

Add

| Type | Name | Size |
|--|------|------|
| <div></div> | | |
| <div><div>Cancel</div><div>Save Draft</div><div><div>< Previous</div><div>Next ></div></div></div> | | |



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Form CT-15 Connecticut Monthly Tax Stamp and Cigarette Report - Resident Distributor

27-Sep-2021

Due Date

31-Aug-2021

Cigarette Distributor

100951061001

TOBACCO PRODUCTS LLC

Form CT-15 Connecticut Monthly Tax Stamp and

Report Line Items

For form instructions, please click [here](#).

Report Documentation

Form CT-15 must be filled out with the appropriate forms and schedules attached. You can visit the [CT Department of Revenue services website](#) to download and print the forms listed below.

Select a file to attach

Type *

Required

File *

[Browse...](#) No file selected.

Cancel

OK

Select the type of documentation and click **Browse** to attach the necessary documentation. At this time we will add Schedule H.

Errors exist with your file. Please fix the following errors and reattach the file. See the file specifications for more information

[Click here to see file specifications](#)

Cancel

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Form CT-15 Connecticut Monthly Tax
Stamp and Cigarette Report - Resident
Distributor

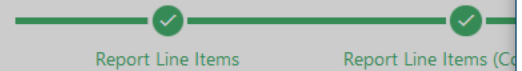
27-Sep-2021

Due Date

Once you have selected the document or file, click **OK**.

TOBACCO PRODUCTS LLC

Form CT-15 Connecticut Monthly Tax Stamp and Cigarette Report



For form instructions, please click [here](#).

Report Documentation

Form CT-15 must be filled out with the appropriate forms and schedules attached. You can visit the [CT Department of Revenue services website](#) to download and print the forms listed below.

- **Schedule H**, Cigarette Packages Stamped During the Month;
- **Form CT-19**, Schedule A, Record of Unstamped Cigarettes Manufactured, Purchased, or Otherwise Acquired;
- **Form CT-23**, Schedule B, Shipments of Unstamped Cigarettes Made to Agencies of the Federal or Connecticut State Government;
- **Form CT-24**, Schedule D, Unstamped Cigarettes Transferred to Another Distributor Within Connecticut;
- **Form CT-25**, Schedule C, Sales and Transfers of Unstamped Cigarettes Outside of Connecticut;
- **Form CT-31**, Cigarette and Unaffixed Stamp Inventory Report for Resident Distributors; or
- **Form CT-38**, Record of Cigarette Stamps Purchased by Distributors.

Errors exist with your file. Please fix the following errors and reattach the file. See the file specifications for more information

[Click here to see file specifications](#)

Select a file to attach

Type

Schedule H

File

CT DRS Schedule H.csv

Cancel

OK

Cancel

Save Draft

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Next >

Once the Schedule H is uploaded, a preview of the first five rows is displayed. If the uploaded file contains errors, the details of the errors will be provided for your review. You can upload the file as many times as necessary. You will not be able to continue unless all errors are corrected.

Click **Add** to continue adding required documentation.

Attachments

Add

| Type | Name | Size |
|------------|-----------------------|----------|
| Schedule H | CT DRS Schedule H.csv | 2 Remove |

File Preview

| Record Field | DistributorFEIN | DistributorName | DistributorStreet | DistributorStreet2 | DistributorCity | DistributorState | DistributorZip | DistributorCountry | Code | ManufacturerName | Manufa |
|----------------|-----------------|------------------|----------------------|----------------------|-----------------|------------------|----------------|--------------------|------|-------------------|--------|
| Record 1 Value | 888888888 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555555 | Dist Count | A | Manufacturer Name | 1 |
| Record 2 Value | 888888889 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555556 | Dist Count | A | Manufacturer Name | 1 |
| Record 3 Value | 888888890 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555557 | Dist Count | A | Manufacturer Name | 1 |
| Record 4 Value | 888888891 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555558 | Dist Count | A | Manufacturer Name | 1 |
| Record 5 Value | 888888892 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555559 | Dist Count | A | Manufacturer Name | 1 |

Cancel

Save Draft

< Previous

Next >

Select the type of documentation and click **Browse** to attach the necessary documentation. Click **OK**.

Form CT-15 must be filled out with the appropriate forms and schedules attached. You can visit the [CT Department of Revenue services website](#) to download and print the forms listed below.

- **Schedule H, Cigarette Packages Stamped During the Month;**
- **Form CT-19, Schedule A, Record of Unstamped Cigarettes Manufactured, Purchased, or Otherwise Acquired;**
- **Form CT-23, Schedule B, Shipments of Unstamped Cigarettes Made to Agencies of the Federal or Connecticut State Government;**
- **Form CT-24, Schedule D, Unstamped Cigarettes Transferred to Another Distributor Within Connecticut;**
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- **Form CT-31, Cigarette and Unaffixed Stamp Inventory Report for Resident Distributors; or**
- **Form CT-38, Record of Cigarette Stamps Purchased by Distributors.**

[Click here to see file specifications](#)

Attachments

Type

Schedule H

File Preview

| Record Field | DistributorFEIN | DistributorName | Distr | DistributorCountry | Code | ManufacturerName | Manufa |
|----------------|-----------------|------------------|----------------------|----------------------|------------|------------------|-------------------|
| Record 1 Value | 888888888 | Distributor Name | Distrib | 5 | Dist Count | A | Manufacturer Name |
| Record 2 Value | 888888889 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555556 |
| Record 3 Value | 888888890 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555557 |
| Record 4 Value | 888888891 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555558 |
| Record 5 Value | 888888892 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555559 |

Select a file to attach

Type

Return Documentation

File

[Browse...](#) CT-19 Schedule A.pdf

Cancel

OK

Cancel

Save Draft

< Previous

Next >

Repeat the previous steps until all required supporting documentation has been uploaded. Once you have all forms and schedules, click **Next**.

[Click here to see file specifications](#)

Attachments

[Add](#)

| Type | Name | Size | |
|----------------------|-----------------------|-------|------------------------|
| Return Documentation | CT-19 Schedule A.pdf | 2,130 | Remove |
| Return Documentation | CT-23 Schedule B.pdf | 100 | Remove |
| Return Documentation | CT-31.pdf | 190 | Remove |
| Schedule H | CT DRS Schedule H.csv | 2 | Remove |

File Preview



| Record Field | DistributorFEIN | DistributorName | DistributorStreet | DistributorStreet2 | DistributorCity | DistributorState | DistributorZip | DistributorCountry | Code | ManufacturerName | Manufa |
|----------------|-----------------|------------------|----------------------|----------------------|-----------------|------------------|----------------|--------------------|------|-------------------|--------|
| Record 1 Value | 888888888 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555555 | Dist Count | A | Manufacturer Name | 1 |
| Record 2 Value | 888888889 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555556 | Dist Count | A | Manufacturer Name | 1 |
| Record 3 Value | 888888890 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555557 | Dist Count | A | Manufacturer Name | 1 |
| Record 4 Value | 888888891 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555558 | Dist Count | A | Manufacturer Name | 1 |
| Record 5 Value | 888888892 | Distributor Name | Distributor Street 1 | Distributor Street 2 | Distr City | CT | 555555559 | Dist Count | A | Manufacturer Name | 1 |

[Cancel](#) [Save Draft](#)

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Form CT-15 Connecticut Monthly Tax
Stamp and Cigarette Report - Resident
Distributor

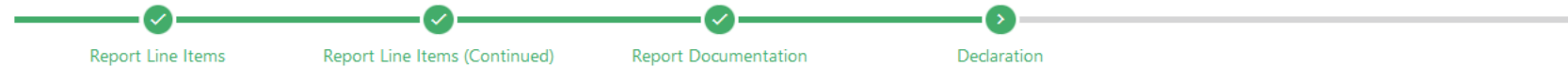
27-Sep-2021

Due Date

31-Aug-2021

Enter your electronic signature, then click **Submit**.

Form CT-15 Connecticut Monthly Tax Stamp and Cigarette Report - Resident Distributor



Paid Tax Preparer

I am a Paid Tax Preparer ☐

Declaration of Taxpayer(s)

I declare under the penalty of law that I have examined this report (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false report or document to DRS is a fine of not more than \$5,000, imprisonment for not more than five years, or both.

Once you have agreed that all the information is correct, select "Submit" below to complete this filing. Upon successful filing, you will receive a confirmation number and the option to print a copy of this filing information.

Sign Here

Taxpayer's Signature
(Name)

Richard Wallace

Date

13-Sep-2021

Cancel

Save Draft

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Submit



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Confirmation

Your return has been submitted to the Connecticut Department of Revenue Services. The return will be posted to your account after your submission is processed. Your confirmation number is: **0-000-058-512.**

Filing Details:

Date Submitted: 9/13/2021 2:36:21 PM
Tax Type: Cigarette Distributor
Form Type: CT-15
Period End: 8/31/2021
Amount of Payment: \$0.00

If you are no longer subject to the Cigarette Distributor tax in Connecticut; please go to the "More..." tab and then "Taxpayer Updates" to close your Cigarette Distributor tax.

Please note: You are responsible to file/pay all returns for any tax type(s) you are closing through the end of the close date.

You are required to upload monthly PACT Act reports. Please navigate to the "More" section in myconnect to upload documentation.

OOPS? If you want to make a change, it is not too late. While a return is still pending, you can return to your account, view your submission, and edit as necessary.

Printable View

OK

Upon successful submission of your return, you will be directed to a Confirmation page.
Click **OK** to return to the Account Summary.



[Click here](#) for more tutorials!



Quick Links

Shortcuts to other e-Services

[Taxpayer Service Center Homepage \(TSC\)](#)



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[File 1099-NEC/CT-1096](#)



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[Find a Submission](#)